

LIFE AND ACCIDENT PROTECTION

These days, it seems we can do almost anything. But there are still some things we can't do, like predict the future. Although King County cannot give you a crystal ball, we can give you the next-best thing: benefits that offer you and your family security and important financial support if you or a covered family member dies or is seriously injured in an accident. By offering both county-provided and supplemental life and accident benefits, the county gives you the flexibility to obtain the financial coverage that meets your personal needs.

As a benefit-eligible employee, you receive county-paid basic life insurance through Aetna Life Insurance and basic accidental death and dismemberment (AD&D) insurance through CIGNA Group Insurance. You also have the option to purchase supplemental life insurance and supplemental AD&D insurance for you and your eligible dependents.

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PARTICIPATING IN THE LIFE AND ACCIDENT PLANS

To effectively use your county life and accidental death and dismemberment (AD&D) insurance plans, you need to know how they work. This section about participation in the life and AD&D insurance plans explains who is eligible for life and AD&D insurance, when and how to enroll, when and how to make changes, what coverage costs, when coverage begins and ends, and how to continue or convert coverage.

LIFE AND ACCIDENT PROTECTION PARTICIPATION ONLY

The information about eligibility and changing coverage in this section applies to the county's life insurance and AD&D insurance plans only. For eligibility and participation regarding other benefits, see the separate descriptions of each benefit in this guide.

Who Is Eligible

You and your family members are eligible for life and AD&D insurance.

Employee

You're eligible for county-paid basic life and AD&D insurance if you're:

- a regular part-time or full-time employee;
- a full-time Local 587 employee; or
- an employee in a provisional or term-limited temporary position (your hiring authority can tell you if your position is benefit-eligible).

A regular part-time employee is someone who works at least half-time but less than full-time in a calendar year.

You're not eligible for basic or supplemental life and basic or supplemental AD&D insurance if you work less than half-time or are a temporary or seasonal employee, or if you work in a capacity that, at the discretion of human resources, is considered contract work or independent contracting.

At the time you become a benefit-eligible employee (usually when you first come to work for the county), you're also eligible to purchase supplemental life and supplemental AD&D insurance for yourself. You may be eligible to purchase supplemental life and supplemental AD&D insurance at other times as well.

Spouse/Domestic Partner

Your spouse/domestic partner is eligible for supplemental life insurance, and supplemental AD&D insurance up to age 80, if you purchase supplemental life and supplemental AD&D insurance for yourself. If both you and your spouse/domestic partner work for the county, however, you may not cover each other under your supplemental life and supplemental AD&D insurance.

Your spouse/domestic partner in active full-time military service isn't eligible for supplemental life and supplemental AD&D insurance.

WHAT IS A DOMESTIC PARTNERSHIP?

You and another individual may certify to the county that you're in a domestic partnership if you:

- share the same regular and permanent residence;
- have a close personal relationship;
- are jointly responsible for basic living expenses (See "Basic Living Expenses" on page 249);
- aren't married to anyone;
- are both 18 years of age or older;
- aren't related by blood closer than would bar legal marriage;
- were mentally competent to consent to contract when your domestic partnership began; and
- are each other's sole domestic partner and are responsible for each other's common welfare.

You and your domestic partner must go online to certify that you're in a domestic partnership. You also must notify the county if and when your domestic partnership ends.

Basic Living Expenses

"Basic living expenses" refers to the cost of basic food, shelter and any other expenses of a domestic partner paid at least in part by a program or benefit for which the partner qualified because of the domestic partnership.

Individuals don't need to contribute equally or jointly to the cost of these expenses, as long as they both agree that they're responsible for the cost.

HOW TO MAKE CHANGES ONLINE

To make changes to your benefit coverage, complete the appropriate county form online at the Benefits and Retirement Web site at www.metrokc.gov/employees/benefits. At the Web site, click "My Benefits" in the left navigation menu and follow the directions. Most non-county forms are available on the Benefits and Retirement Web site. For forms not available on the Web site, contact the appropriate company or agency. (See *Contact Information*.)

Dependent Children

Your children are eligible for supplemental life and supplemental AD&D insurance if you purchase supplemental life and supplemental AD&D insurance for yourself. If both you and your spouse/domestic partner work for the county, however, only one of you may cover your eligible children.

Eligible children include:

- your unmarried children or your spouse/domestic partner's unmarried children if they're under age 23 and depend chiefly on you for support and maintenance, and you may claim them on your federal tax return. "Children" or "child" means:
 - biological children;
 - adopted children, or children legally placed with you for adoption or for whom you assume total or partial legal obligation for support in anticipation of adoption;
 - stepchildren; and
 - legally designated wards, including legally placed foster children, children placed with you as legal guardian or children named in a Qualified Medical Child Support Order (QMCSO) as defined under federal law and authorized by the plan (For more information, see "Qualified Medical Child Support Order (QMCSO)" in "Participating in the Health Care Plans" in *Health Care*);
- a child (as defined above) age 23 or older if he/she:
 - was incapacitated and covered under your plan before age 23;
 - continues to be incapacitated due to a developmental or physical disability; and
 - is chiefly dependent on you for support and you may claim him/her on your federal tax return. (For more information, see "Disabled Dependent Children" on page 251.)

Disabled Dependent Children

If you want to continue coverage for a disabled child when he/she turns 23, you must submit a Continue Coverage for Disabled Adult Child form to Benefits and Retirement Operations within 31 days of the child's 23rd birthday. You also must provide proof of the child's continued disability annually thereafter.

FORMS

Forms are available at www.metrokc.gov/employees/benefits or from Benefits and Retirement Operations. (See *Contact Information*.)

When and How to Enroll

While you automatically receive basic life and AD&D insurance, you have limited opportunities to purchase supplemental life and supplemental AD&D insurance. It's important to know when and how to enroll.

Enrolling When First Eligible

When you become eligible for benefits, you receive benefit information and enrollment forms in a Regular Employee New Hire Guide at your new employee orientation. You're automatically enrolled in the basic life and AD&D plans.

If you want to purchase supplemental life and supplemental AD&D insurance, you must return your benefit enrollment forms to Benefits and Retirement Operations within 31 days after the date your benefits begin. If your hire date, which is the first day you report to work, is the first day of the month, your supplemental coverage begins that day. If your hire date is any other day of the month, your supplemental coverage begins on the first day of the following month.

Supplemental Life Insurance

If you don't purchase supplemental life insurance when you first become eligible for coverage, you won't have the opportunity to purchase it again unless:

- you have a qualifying life event;
- you leave county employment and return to a benefit-eligible county position; or
- the county opens supplemental life insurance enrollment to all regular employees during the annual open enrollment.

Supplemental AD&D Insurance

If you don't purchase supplemental AD&D insurance when you first become eligible for coverage, you won't have the opportunity to purchase it again unless:

- you have a qualifying life event;

BASIC LIFE AND AD&D INSURANCE

You receive county-paid basic life and AD&D insurance when you become eligible for coverage.

IMPORTANT

If you wish to purchase supplemental life and supplemental AD&D insurance, you must return your benefit enrollment forms to Benefits and Retirement Operations within 31 days after the date your coverage begins.

- you enroll in supplemental AD&D insurance during the annual open enrollment; or
- you leave county employment and return to a benefit-eligible county position.

Enrolling During the Annual Open Enrollment

During the annual open enrollment, you can decrease supplemental life insurance and purchase, increase, reduce or drop supplemental AD&D insurance. You cannot purchase or increase supplemental life insurance during the annual open enrollment unless the county opens the option to purchase and increase supplemental life insurance to all regular employees at that time.

When and How to Name a Beneficiary

Because you automatically receive basic life and AD&D insurance when you first become benefit-eligible, and even if you don't elect supplemental life and supplemental AD&D insurance, you need to name one or more beneficiaries to receive your benefit in the event of your death.

When you first enroll, you receive two beneficiary forms: an Aetna Life Insurance Designation of Beneficiary form for your life insurance, and a CIGNA Beneficiary Designation form for your AD&D insurance. You need to complete and mail these forms directly to Aetna for life insurance and to CIGNA for AD&D insurance. Copies of these forms are available from Benefits and Retirement Operations and its Web site. (See *Contact Information*.)

You may name anyone you wish as a beneficiary. There are two types of beneficiaries:

- primary beneficiaries receive your benefit first; and
- contingent beneficiaries receive your benefit if all primary beneficiaries are deceased at the time of your death. If you don't designate beneficiaries as primary or contingent, all beneficiaries are considered primary.

You may designate more than one primary beneficiary and more than one contingent beneficiary. When you do, you must assign a percentage of the benefit you want each beneficiary to receive. Percentages for all primary beneficiaries must total 100%, and percentages for all contingent beneficiaries must total 100%. If you don't assign percentages, beneficiaries receive equal shares.

If you don't name a beneficiary, benefits are paid to your spouse, your children, your parents or your siblings, in that order. If none of them survives you, benefits are paid to your estate.

You may change your beneficiaries at any time by completing the Aetna Life Insurance Designation of Beneficiary form and CIGNA Beneficiary Designation form, and mailing the forms to Aetna and CIGNA, respectively. (See *Contact Information*.)

Benefits are paid according to the most recently signed form on file. If you elect supplemental life and/or supplemental AD&D insurance for your family members and a covered family member dies, you are the beneficiary. Benefits for dismemberment, paralysis and other losses to you or your covered family members are paid to you.

When and How to Make Changes

Because things change in life, you may want to make changes to your life and AD&D insurance. It's important to know when and how you can make changes.

Changes You May Make After Qualifying Life Events

When you have a qualifying life event, you may add, increase, decrease or drop supplemental life and supplemental AD&D insurance for you and your eligible dependents. However, you may add supplemental life and supplemental AD&D insurance for your eligible dependents only if you already have supplemental insurance for yourself.

QUALIFYING LIFE EVENTS

Qualifying life events include:

- marriage or establishment of a domestic partnership;
- divorce or dissolution of a domestic partnership;
- birth of a child, adoption of a child or placement of a child as a legal ward;
- death of a dependent; and
- your spouse/domestic partner's loss of employer-sponsored coverage.

Changes You May Make at Any Time

The only change you can make at any time to supplemental life and supplemental AD&D insurance is to drop or decrease coverage—that's because you're paying for it.

Change Forms

To add or change life and AD&D insurance after a qualifying life event, complete the appropriate form online within 31 days after the qualifying life event.

If you wish to drop your supplemental life and/or supplemental AD&D insurance, you need to submit a written request to Benefits and Retirement Operations or e-mail your request to kc.benefits@metrokc.gov. (See *Contact Information*.)

HOW TO MAKE CHANGES ONLINE

To make changes to your benefit coverage, complete the appropriate county form online at the Benefits and Retirement Web site at www.metrokc.gov/employees/benefits. At the Web site, click “My Benefits” in the left navigation menu and follow the directions. Most non-county forms are available on the Benefits and Retirement Web site. For forms not available on the Web site, contact the appropriate company or agency. (See *Contact Information*.)

What Coverage Costs

The county pays for your basic life and AD&D insurance; you pay for any supplemental insurance you purchase for you and your eligible dependents. (For information on who qualifies as an eligible dependent, see “Spouse/Domestic Partner” on page 249 and “Dependent Children” on page 250.)

If you’re on an unpaid leave of absence, you may pay for basic life and AD&D insurance, as well as any supplemental insurance you already have.

Basic Life and AD&D Insurance

The county pays for your basic life and AD&D insurance if you’re a regular employee.

Depending on your base annual salary, your basic life insurance coverage may create imputed income, and you may have to pay some additional taxes. (See “Imputed Income” on page 261 for more information.)

Supplemental Life Insurance

The cost you pay for supplemental insurance is based on your age and the amount of insurance you choose. You pay for supplemental life insurance through payroll deduction.

Supplemental Life Insurance for You

You may purchase supplemental life insurance equal to 1, 2, 3 or 4 times your base annual salary, rounded up to the next \$1,000, without evidence of insurability (EOI). Your base annual salary is your base pay excluding overtime, bonuses, shift differential, premium pay or any other special pay. If you die, your beneficiaries receive the amount you elect in addition to your county-paid basic life insurance benefit. The maximum supplemental life insurance you may purchase is \$400,000.

The amount you pay for supplemental life insurance for yourself depends on your age and whether you elect 1, 2, 3 or 4 times your base annual salary in supplemental life insurance for yourself. If your birthday moves you into a different age group, your premiums are adjusted the month of your birthday. As your salary increases, your premium increases as well.

To estimate your monthly cost for supplemental life insurance, you must estimate your base annual salary. To do so, multiply your hourly rate by the number of hours you work each week, then multiply the answer by 52—for example, if you earn \$20.10 per hour and work 40 hours per week, your base annual salary is $\$20.10 \times 40 \times 52 = \$41,808$.

When you've calculated your base annual salary, use it and the age-specific rates in the following worksheet to estimate your total monthly cost for supplemental life insurance.

Supplemental Life Insurance for Your Eligible Dependents

If you elect supplemental life insurance for yourself, you may purchase supplemental life insurance for your eligible dependents:

- For your spouse/domestic partner, you may purchase 50% of the amount of your supplemental insurance, up to \$200,000. Your spouse/domestic partner's coverage over \$100,000 requires evidence of insurability (EOI) before Aetna will approve the additional amount. If the additional amount is not approved or your spouse/domestic partner doesn't submit EOI, his/her supplemental life insurance coverage is capped at \$100,000. As your salary increases, the premium you pay for your spouse/domestic partner coverage increases.
- For your children, you may purchase \$10,000 for each child age 6 months to 23 years, and \$500 for each child age 14 days to 6 months (if you cover one child, all of your eligible children are covered; no EOI is required).

The cost for your spouse/domestic partner is based on your age and the level of coverage you choose; the cost for your children is \$.82 per month regardless of the number of children you cover.

Your Age	Cost of Supplemental Life/\$1,000
Under 25	\$.034
25–29	\$.041
30–34	\$.055
35–39	\$.055
40–44	\$.070
45–49	\$.111
50–54	\$.166
55–59	\$.296
60–64	\$.455
65–69	\$.781
70+	\$1.267

IMPORTANT!

If you and your spouse/domestic partner both work for the county, you may not cover each other, and only one of you may cover your eligible children under this plan. However, you may add your spouse/domestic partner and children for coverage if they lose their county coverage. (See “Changes You May Make After Qualifying Life Events” on page 253.)

To Calculate Your Total Monthly Cost for Supplemental Life...		
Enter your base annual salary (BAS) here	1.	\$
Enter your BAS "multiplier" (1, 2, 3 or 4) here	2.	\$
Multiply line 1 by line 2 and enter the answer here	3.	\$
Round line 3 to the next higher \$1,000 and enter the amount here	4.	\$
Drop the last 3 zeros from the amount on line 4 and enter the new amount here	5.	\$
Enter the cost of supplemental life/\$1,000 rate for your age here	6.	\$
Multiply line 5 by line 6 and enter the cost of supplemental life for you here	7.	\$
If you elect supplemental life for your spouse/DP, enter .5 here; if not, enter 0	8.	\$
Multiply line 7 by line 8 and enter the cost of supplemental life for your spouse/DP here	9.	\$
If you elect supplemental life for children, enter \$.82 here; if not, enter 0	10.	\$
Add lines 7, 9 and 10 for your total monthly cost here		\$

Supplemental AD&D Insurance

The cost you pay for supplemental AD&D insurance for you and your eligible dependents is based on the amount you choose for yourself. You pay for supplemental AD&D insurance through payroll deduction.

Supplemental AD&D Insurance for You

You may purchase from \$50,000 to \$500,000 of supplemental AD&D insurance in increments of \$50,000 without providing evidence of insurability (EOI).

Supplemental AD&D Insurance for Your Eligible Dependents

You may purchase supplemental AD&D insurance for:

- your spouse/domestic partner at 50% or 100% of the amount you elect for yourself; and
- your children at 10% of the amount you elect for yourself.

If both you and your spouse/domestic partner work for the county, you may not cover each other, and only one of you may cover your eligible children under the plan. However, you may add your spouse/domestic partner and children for coverage if they lose their county coverage. (See "Changes You May Make After Qualifying Life Events" on page 253.)

Monthly Cost of Supplemental AD&D Insurance

To estimate your monthly cost for supplemental AD&D insurance, add across each row in the following table for those you want to cover.

If you elect this amount of supplemental AD&D insurance...	Your monthly cost will be...	The monthly cost to cover your spouse/domestic partner at 50% of your amount will be...	The monthly cost to cover your spouse/domestic partner at 100% of your amount will be...	The monthly cost to cover your children at 10% of your amount will be...
\$50,000	\$.85	\$.43	\$.85	\$.25
\$100,000	\$1.70	\$.85	\$1.70	\$.50
\$150,000	\$2.55	\$1.28	\$2.55	\$.75
\$200,000	\$3.40	\$1.70	\$3.40	\$1.00
\$250,000	\$4.25	\$2.13	\$4.25	\$1.25
\$300,000	\$5.10	\$2.55	\$5.10	\$1.50
\$350,000	\$5.95	\$2.98	\$5.95	\$1.75
\$400,000	\$6.80	\$3.40	\$6.80	\$2.00
\$450,000	\$7.65	\$3.83	\$7.65	\$2.25
\$500,000	\$8.50	\$4.25	\$8.50	\$2.50

When Coverage Begins

Coverage begins the first day of the month following your hire date, which is the first day you report to work, unless modified by your collective bargaining agreement. If your hire date is the first day of the month, your coverage begins the same day.

If you happen to be ill or injured and away from work on the date coverage begins, your life insurance will take effect when you return to work for one full day, and your AD&D insurance will take effect on the first day of the month following your return to work.

When Coverage Ends

Coverage ends on:

- the last day of the month you lose eligibility, resign, are terminated, retire, fail to make any required payments for self-paid coverage or die; or
- the day the plan terminates.

Your covered dependent's life and AD&D insurance also ends on the last day of the month your covered dependent enters into active full-time military service.

How to Continue or Convert Coverage

When you leave county employment, you may want to know your options for continuing and/or converting your life and AD&D insurance coverage.

Life Insurance

When you leave county employment for reasons other than disability, you may continue your existing life insurance or convert it to a whole life policy.

Continuing Group Term Life Insurance (For Reasons Other Than Disability)

Your county life insurance, which is group term insurance, is portable. That means that when you leave county employment for reasons other than disability, you may continue to pay Aetna directly for the basic and supplemental coverage you had on your last day of employment, up to \$500,000, until you reach age 99. The age-specific rates you pay for the continued coverage may be different from the rates paid by active employees.

If you continue coverage, you may also continue the supplemental life insurance you had on your last day of employment for:

- your spouse/domestic partner until he/she is age 65, up to \$25,000; and
- your dependent children until they're age 19 (or age 23 if they're dependent solely on you for support), up to \$5,000.

Employee or covered dependent life benefits in excess of the portability maximums may be converted to a whole life policy. (See "Converting to Individual Whole Life Insurance" on page 259.)

Portability coverage reduces to:

- 65% of the original amount on January 1 following the date you reach age 65;
- 40% of the original amount on January 1 following the date you reach age 70; and
- 25% of the original amount on January 1 following the date you reach age 75.

Coverage terminates when you reach age 99 or when you stop premium payments. Continued coverage for your spouse/domestic partner and children ends when they reach the limiting age or when your coverage ends. However, they may convert to an individual whole life insurance policy. (See "Converting to Individual Whole Life Insurance" on page 259.)

To continue coverage, you must request a Portability Application from Aetna and return the completed form with your first premium payment within 31 days after the date your county coverage ends. (See *Contact Information*.) If you die during that 31-day period, your beneficiaries or estate will receive the full amount of your life insurance coverage in force before coverage ended. This payment is made under the group policy, whether or not you actually applied to continue coverage. If you applied, any fees or premiums you paid are refunded.

For information about continuing your life insurance coverage, contact Aetna. (See *Contact Information*.)

Continuing Group Term Life Insurance When You're Disabled

You may be able to continue life insurance if you become disabled. You're considered permanently and totally disabled only if disease or injury stops you from working at your own job or any other job for pay or profit, and it must continue to stop you from working at any reasonable job. A "reasonable job" is defined as any job for pay or profit that you are (or may reasonably become) fitted for by education, training or experience.

If You Become Disabled Before Age 60

If you become disabled before age 60 and Aetna determines that your disability is permanent and total—in other words, approves your premium waiver application—your basic and supplemental life insurance can be continued.

To be eligible for the premium waiver, you must meet all these requirements:

- your life insurance must be in force when you become permanently and totally disabled;
- you must be under age 60 on the date you last worked;
- your permanent and total disability must have lasted at least nine months; and
- you must furnish all proof when requested (Aetna may ask you to have an exam, at its expense, before accepting the proof).

(For more details, see "Life Insurance Coverage" in "You Become Disabled" in *What Happens If*.)

If You Become Disabled After Age 60

If you become disabled after age 60 and before you retire or end county employment, the basic life insurance you had on your last day continues for up to 12 months or age 65, whichever occurs first. To continue your basic life insurance, you must notify Benefits and Retirement Operations within 31 days after the last day you worked. You also have the option of paying to continue any supplemental life insurance you had on your last day for up to 12 months or age 65, whichever occurs first. (For more details, see "Life Insurance Coverage" in "You Become Disabled" in *What Happens If*.)

Converting to Individual Whole Life Insurance

You, your spouse/domestic partner and your children may apply to convert your county life insurance to an individual whole life insurance policy if you:

- leave county employment for any reason; or
- elect to continue your county life insurance when you leave county employment, but discontinue it or lose eligibility for it later.

DEFINED TERMS

Be sure you understand the meaning of the terms used in this summary, such as “evidence of insurability.” (See “Glossary” on page 275.)

To convert your county life insurance to an individual whole life insurance policy, you or your covered dependent must apply to Aetna within 31 days after the date your county coverage ends. (See *Contact Information*.) If you die during that 31-day period, your beneficiaries or estate will receive the full amount of your life insurance coverage in force before coverage ended. This payment is made whether or not you actually applied to continue coverage. If you already had applied, any fees or premiums you paid are refunded.

For information about converting your life insurance coverage, contact Aetna. (See *Contact Information*.)

AD&D Insurance

Your AD&D insurance isn't portable. However, you may be eligible to purchase AD&D conversion insurance with CIGNA if your coverage ends because you:

- leave county employment for any reason;
- are no longer eligible (except for age); or
- lose coverage because the CIGNA group policy terminates.

Benefits will differ from the county plan's benefits.

No medical certification is needed, but you and your dependents must be under age 70.

You must apply in writing within 31 days after the date your county coverage ends.

For information about continuing your AD&D insurance, contact CIGNA. (See *Contact Information*.)

LIFE INSURANCE PLAN

This section tells you important things you need to know about your life insurance. Knowing how the life insurance plan works will help you understand the benefits for which you or your eligible dependents are eligible.

The benefits offered by the life insurance plan are insured by Aetna. This means that Aetna is financially responsible for claim payments and other costs.

How the Life Insurance Plan Works

The life insurance plan includes:

- basic life insurance, which the county provides to benefit-eligible employees at no cost; and
- supplemental life insurance, which enables you to purchase additional coverage for you and your eligible family members.

If you elect supplemental life insurance for yourself and you die, your beneficiaries receive a benefit equal to the supplemental amount you've purchased **plus** your county-paid basic life insurance. If you elect supplemental life insurance for your eligible dependents, you're the beneficiary of supplemental life insurance if one of your covered dependents dies.

Calculating Life Insurance Benefits

The amount of life insurance benefit you or your beneficiaries receive is calculated from your basic insurance and, if you elected it, your supplemental insurance.

Basic Life Insurance

Your basic life insurance is based on your base annual salary, which is your base pay excluding overtime, bonuses, shift differential, premium pay or any other special pay. The maximum basic life insurance you may have is \$200,000. If you die, your beneficiaries receive a benefit equal to your base annual salary, rounded up to the next \$1,000.

Your coverage will increase over time because your basic life benefit automatically increases (up to \$200,000) as your salary increases. Adjustments to the basic life insurance benefit due to a salary change automatically occur on the first day of the month following the salary change, unless you're on an approved unpaid leave. In that case, the adjustment occurs on the first day of the month following the date you return to active work. If you happen to be ill or injured and away from work on the date your coverage increases, the increase will take effect when you return to work for one full day.

Imputed Income

Under IRS regulations, \$50,000 is the maximum **tax-free** life insurance coverage an employer may provide. When your basic life insurance exceeds \$50,000, you pay the income tax on the value of county-paid premiums applicable to your coverage above \$50,000. The value is added to your paycheck and reflected in your W-2 earnings as "imputed income."

WHEN YOUR SALARY INCREASES

Because your basic life insurance benefit is based on your base annual salary, your benefit amount increases as your salary increases.

WHEN YOUR SALARY INCREASES

Because your supplemental life insurance benefit is based on your base annual salary, your benefit amount increases as your salary increases.

Supplemental Life Insurance

The supplemental life insurance benefit you or your beneficiaries receive depends on the level of coverage you purchase.

Supplemental Life Insurance for You

If you purchase supplemental life insurance and you die, your beneficiaries receive the supplemental life insurance amount you purchased—1, 2, 3 or 4 times your base annual salary—in addition to your basic life insurance.

As with basic life insurance, your supplemental life insurance increases automatically (up to \$400,000) as your salary increases. Adjustments to the supplemental life insurance benefit due to a salary change automatically occur the first day of the month following the salary change, unless you're on an approved unpaid leave. In that case, the adjustment occurs on the first day of the month following the date you return to active work. If you happen to be ill or injured and away from work on the date your coverage increases, the increase will take effect when you return to work for one full day.

Supplemental Life Insurance for Your Dependents

If you purchase supplemental life insurance for your spouse/domestic partner and he/she dies, you receive 50% of the supplemental life insurance amount you purchased—that is, 50% of 1, 2, 3 or 4 times your base annual salary. If your spouse/domestic partner's insurance was capped at \$100,000, you receive \$100,000 or 50% of the amount of supplemental insurance you elected, whichever is less.

If you purchase supplemental life insurance for any of your children and he/she dies, you receive:

- \$500 if the child was 14 days up to 6 months old; or
- \$10,000 if the child was age 6 months up to 23 years old.

Up Close and Personal

The following example helps illustrate how the life insurance plan works.

Meet John

When John became a project/program manager for the county in March, he elected supplemental life insurance at four times his annual salary to supplement his county-paid basic life insurance of one times his base annual salary. John unexpectedly died of a heart attack five months later. John had named his spouse, Shirley, as his primary beneficiary, followed by his son and daughter as contingent beneficiaries. Because Shirley is John's only primary beneficiary, she'll receive 100% of both the basic and the supplemental insurance benefit.

Here's how much Shirley receives:

John's base annual salary	Basic life insurance benefit	Supplemental life insurance benefit	Total life insurance benefit
\$ 76,197	\$77,000 (John's base annual salary rounded up to the next \$1,000)	\$76,197 x 4 = \$304,788 (John's base annual salary x 4)	\$77,000 + \$304,788 = \$381,788

Understanding Evidence of Insurability (EOI)

Evidence of insurability (EOI) is any statement of a person's physical condition, occupation or other factor that provides proof that he/she is insurable. Benefits and Retirement Operations provides an EOI application when EOI is required under the policy. The application should be completed and returned directly to Aetna within 31 days of receipt.

EOI is required for a spouse/domestic partner when coverage is requested in an amount greater than \$100,000 (EOI isn't required if coverage subsequently exceeds \$100,000 as the result of your salary increase). The coverage amount above \$100,000 doesn't take effect until EOI is approved by Aetna. If EOI isn't received or approved, coverage is capped at \$100,000.

No EOI is required for eligible children.

Receiving Benefit Payments

It's important for you to know how claims are filed and how benefits are paid.

How to File a Claim

For a death or accelerated claim, you or your beneficiary should contact Aetna to file a claim. Benefits and Retirement Operations staff will help file the claim with Aetna and provide referrals to counseling and other resources as requested. (See *Contact Information*.)

Aetna processes the claim within 10 business days following receipt of a complete claim. If Aetna needs more time, you or your beneficiary is notified in writing, within the initial 10 days of receipt of the claim, of the need for an extension of up to 90 days.

Aetna may, at its own expense and unless prohibited by law, have an autopsy performed to determine a death benefit.

If the claim is denied, you or your beneficiary is notified in writing of the reasons for the denial, the right to appeal and the right to obtain copies of all documents related to the claim that the plan reviewed in making the determination.

How Benefits Are Paid

Your life insurance benefit can be paid at your death or the death of a covered dependent, or in the case of a terminal illness.

In Case of Death

Life insurance benefits are payable if you or a family member dies. Insurance is paid in a lump sum and is not subject to federal income tax. Be sure to consult your tax advisor for more information on taxes and death benefits.

How a Lump Sum Is Paid

When a death benefit of \$5,000 or more is payable to you or a beneficiary, it is deposited into an Aetna Benefits Checkbook Account in the person's name. This account will earn competitive money market interest rates. You or the beneficiary receives personalized checks for immediate access to all or part of the funds deposited in the account and may write a check for no less than \$250.

In Case of Terminal Illness

If you or your covered spouse/domestic partner has a terminal illness, certain benefits may be paid before death. This is called the "accelerated benefit option." You may elect to receive up to 50% of the life insurance benefit (up to \$300,000 for you and up to \$100,000 for your spouse/domestic partner) while you or your spouse/domestic partner is living if the following requirements are met:

- life expectancy must be 24 months or less; and
- certification of the terminal illness must be provided by a physician legally licensed to practice medicine, and accepted by Aetna before accelerated benefits are paid.

While an accelerated benefit claim is pending, Aetna has the right, as often as reasonably necessary, to have a covered person examined by a health or vocational professional of Aetna's choice and at Aetna's expense.

Accelerated benefits are based on the amount of life insurance in effect according to county payroll records on the date Aetna accepts the physician's certification of terminal illness. Accelerated benefits are payable in a lump sum. The life insurance benefit is reduced by the amount of the accelerated benefit payment, and the remaining benefit is paid to you or your beneficiary after death.

If you have supplemental life insurance and elect the accelerated benefit option, you must continue paying for supplemental life insurance until coverage ends.

For more details about the accelerated benefit option, contact Benefits and Retirement Operations. (See *Contact Information*.)

IMPORTANT THINGS TO KEEP IN MIND

Here are a few important things to know about the accelerated benefit option:

- accelerated benefits can be used to pay for special nursing requirements or hospice arrangements, needed medical equipment, or custodial care and other expenses;
- accelerated benefits are payable only once for you and once for your spouse/domestic partner;
- your accelerated benefit payment reduces the amount of the life insurance benefit that may be converted to an individual policy;
- you're responsible for any taxes due to an accelerated benefit payment; and
- your spouse/domestic partner must agree with your accelerated benefit option election.

ACCIDENTAL DEATH AND DISMEMBERMENT INSURANCE PLAN

This section tells you important things you need to know about your accidental death and dismemberment (AD&D) insurance. Knowing how the AD&D insurance plan works will help you understand the benefits for which you or your eligible dependents are eligible.

The benefits offered by this plan are underwritten by Life Insurance Company of North America, a subsidiary of CIGNA Corporation. This means that Life Insurance Company of North America is responsible for claim payments and other costs. CIGNA Group Insurance products and services are provided by underwriting subsidiaries of CIGNA Corporation, including Life Insurance Company of North America. "CIGNA" is used to refer to these subsidiaries and is a registered service mark.

How the AD&D Insurance Plan Works

The accidental death and dismemberment (AD&D) insurance plan pays benefits if you or a covered family member dies or suffers a specified dismemberment, paralysis or other loss that occurs within 365 days of a covered accident. (For details, see "Schedule of Benefits" on page 267.)

The plan includes:

- basic AD&D insurance, which the county provides to benefit-eligible employees at no cost; and
- supplemental AD&D insurance, which enables you to purchase additional coverage for yourself only or coverage for you and your family.

DEFINED TERMS

Be sure you understand the meaning of the terms used in this summary, such as "covered accident." (See "Glossary" on page 275.)

EOI ISN'T REQUIRED

You're not required to provide evidence of insurability (EOI) in order to enroll in AD&D insurance.

WHEN YOUR SALARY INCREASES

Because your basic AD&D insurance benefit is based on your base annual salary, your benefit amount increases as your salary increases.

If you elect supplemental AD&D insurance for yourself and you die as the result of a covered accident, your beneficiaries receive a benefit equal to the supplemental amount you've purchased **plus** your county-paid basic AD&D insurance benefit. If you elect supplemental AD&D insurance for your eligible dependents, you're the beneficiary of supplemental AD&D insurance if one of your covered dependents dies as the result of a covered accident.

Calculating AD&D Insurance Benefits

The amount of AD&D insurance benefit you or your beneficiaries receive is calculated from your AD&D insurance.

Basic AD&D Insurance

Your basic AD&D insurance is based on your base annual salary, which is your base pay excluding overtime, bonuses, shift differential, premium pay or any other special pay. The maximum basic AD&D insurance you may have is \$200,000.

Your coverage will increase over time because your basic AD&D benefit automatically increases (up to \$200,000) as your salary increases. Adjustments to the AD&D insurance benefit due to a salary change automatically occur on the first day of the month following the salary change, unless you're on an approved unpaid leave. In that case, the adjustment occurs on the first day of the month following the date you return to active work. If you happen to be ill or injured and away from work on the date your coverage increases, the increase will take effect when you return to work for one full day.

Supplemental AD&D Insurance

The supplemental AD&D insurance benefit you or your beneficiaries receive depends on the level of coverage you purchase.

Supplemental AD&D Insurance for You

If you purchased supplemental AD&D insurance and you die as the result of a covered accident, your beneficiaries receive the supplemental AD&D insurance amount you purchased—from \$50,000 to \$500,000—in addition to your basic AD&D insurance.

After supplemental AD&D insurance has been in effect for 12 consecutive months, supplemental coverage for you increases 1% every January 1 until it's been increased by a maximum of 10%. Each year's increase is calculated on the previous year's coverage amount. There is no additional cost for this "escalated" coverage.

Supplemental AD&D Insurance for Your Dependents

If you purchase supplemental AD&D insurance for your spouse/domestic partner and he/she dies as the result of a covered accident, you receive 50% or 100% of the supplemental AD&D insurance you purchased for yourself.

If you purchase supplemental AD&D insurance for any of your children and he/she dies as the result of a covered accident, you receive 10% of the supplemental AD&D insurance you purchased for yourself.

After supplemental AD&D insurance has been in effect for 12 consecutive months, supplemental coverage for your covered dependents increases 1% every January 1 until it's been increased by a maximum of 10%. Each year's increase is calculated on the previous year's coverage amount. There is no additional cost for this "escalated" coverage.

Up Close and Personal

The following example helps illustrate how the AD&D insurance plan works.

Meet Judy

When Judy became a division manager for the county in February, she elected \$300,000 in supplemental AD&D insurance for herself to supplement her county-paid basic AD&D insurance of one times her base annual salary. Judy unexpectedly died five months later after falling off a ladder and hitting her head. Judy had named her domestic partner, Natalie, and her son, William, as her primary beneficiaries to each receive 50% of both the basic AD&D and supplemental AD&D benefit.

Here's how much Natalie and William each receive:

Judy's base annual salary	Basic AD&D insurance benefit	Supplemental AD&D insurance benefit	Total AD&D insurance benefit
\$ 108,752	\$109,000 (Judy's base annual salary rounded up to the next \$1,000)	\$300,000	$(\$109,000 + \$300,000) \div 2 = \$204,500$ for each beneficiary

Judy's beneficiaries would also receive her county-paid basic life insurance benefit and benefits from any supplemental life insurance she had elected.

Schedule of Benefits

AD&D insurance protects you against losses due to accidents. Depending on the type of loss or injury, the plan pays up to 100% of the full AD&D benefit amount for you or your spouse/domestic partner, subject to reductions for age, and up to 200% of the full AD&D benefit amount for your covered children. (See "Reduction in Benefits" on page 269.)

To help survivors of severe accidents adjust to new living circumstances, certain benefits are payable for paralysis, dismemberment, and loss of eyesight, speech or hearing according to the following table. Benefits are payable for death, specified dismemberment, paralysis and other losses that occur within 365 days of the covered accident that caused the covered loss.

IMPORTANT!

To receive benefits, you or your covered dependent must be covered under the plan on the date of the accident.

If the covered person suffers loss of...	You or your spouse/ domestic partner receives...	Your children receive...
<ul style="list-style-type: none"> Life Both hands or both feet, or sight in both eyes, or any combination Speech and hearing in both ears Quadriplegia (total paralysis of both arms and legs) 	Full benefit amount	100% of the full benefit amount for loss of life; 200% of the full benefit amount for other losses listed
<ul style="list-style-type: none"> Paraplegia (total paralysis of both legs) 1 arm or 1 leg 	75% of the full benefit amount	150% of the full benefit amount
<ul style="list-style-type: none"> 1 hand or 1 foot or sight in 1 eye Speech Hearing in both ears Paralysis of 1 arm and 1 leg 	50% of the full benefit amount	100% of the full benefit amount
<ul style="list-style-type: none"> Thumb and index finger on the same hand Paralysis of 1 arm or 1 leg 	25% of the full benefit amount	50% of the full benefit amount

Only one amount—the largest you’re entitled to receive—is paid for all losses resulting from a single accident.

A “loss” is defined as:

- loss of arm or leg—complete severance at or above the elbow or knee joint;
- loss of hearing—irrecoverable loss of hearing that cannot be corrected by any hearing aid or device;
- loss of hand or foot—complete severance of a limb at or above the wrist or ankle joint;
- loss of sight—total and irrecoverable loss of sight;
- loss of speech—complete inability to communicate audibly in any degree;
- loss of thumb and index finger—complete severance of the thumb and index finger through or above the joint closest to the wrist;
- paralysis of a limb—complete and irreversible loss of use, without severance of a limb (this loss must be determined by a physician to be complete and not reversible). (“Severance” is the complete separation and dismemberment of the limb from the body.)

Reduction in Benefits

For you and a covered spouse/domestic partner, supplemental AD&D benefit amounts are reduced to:

- 70% of the benefit amount for ages 70–74;
- 45% of the benefit amount for ages 75–79;
- 30% of the benefit amount for ages 80–84 (applies to you only); and
- 15% of the benefit amount for ages 85 and over (applies to you only).

Additional Benefits

AD&D insurance offers some benefits in addition to AD&D coverage.

Brain Damage Benefit

The plan pays an additional benefit if you or a covered dependent sustains brain damage as the result of a covered accident. This benefit is payable if:

- brain damage occurs within one year of the accident;
- the covered person is hospitalized for at least seven days within one year of the accident;
- brain damage continues for 12 consecutive months; and
- a physician determines that brain damage is permanent, complete and irreversible at the end of 12 consecutive months.

The plan pays 50% of your AD&D benefit up to \$100,000 in one lump sum during the 13th month following the date of the covered accident. The amount payable by this brain damage benefit and any amount the plan paid or owes under the dismemberment, loss of sight, speech or hearing, and paralysis benefit will not exceed the full benefit amount. (See “Schedule of Benefits” on page 267.)

Child Care Benefit

A child care benefit is payable at the time of death or within one year of a covered accident if:

- you elected supplemental AD&D insurance for your child;
- you or your covered spouse/domestic partner dies as the result of a covered accident; and
- you have a surviving child under age 13 in a licensed child care center (or your child is enrolled within one year of the covered accident).

The child care benefit pays an annual sum for each covered child of up to 5% of your supplemental AD&D benefit, up to \$5,000 a year, until the child enters first grade or for five straight years, whichever occurs first.

If, at the time of the accident, coverage for a dependent child is in force and no dependent child qualifies, the designated beneficiary receives an additional benefit of \$1,500.

DEFINITION OF “BRAIN DAMAGE”

“Brain damage” means physical damage to the brain which causes the complete inability to perform all the substantial and material functions and activities normal to everyday life.

Payment is made to the child's surviving custodial parent or legal guardian. Each payment is made at the end of a 12-month period once documented child care center expenses have been provided.

Coma Benefit

The plan pays an additional benefit if you or a covered dependent enters a coma as the result of a covered accident within 31 days of the accident. After the covered person has been comatose for 31 days, the plan makes monthly payments of 1% of the full AD&D benefit—up to 11 monthly payments. If you or your dependent recovers, payments will stop.

If you or your dependent dies as the result of a covered accident while receiving the monthly coma benefit, the plan pays the full benefit amount (the amount already paid isn't subtracted from the death benefit) minus any amount the plan paid or owes under the dismemberment, loss of sight, speech or hearing, and paralysis benefits.

If the coma continues after the 11 monthly payments, the covered dependent is entitled to a lump sum equal to the full benefit amount, minus any amount the plan paid or owes under the benefit for dismemberment, loss of sight, speech or hearing, and paralysis. No further benefit will be paid from this plan, and coverage will end.

No coma benefit will be paid for any loss excluded from the plan. (See "Understanding Exclusions and Limitations" on page 274.) In addition, the coma benefit isn't payable for a loss resulting from sickness, disease, bodily infirmity, medical or surgical treatment, bacterial infection (unless it results from an accidental external injury or food poisoning) or viral infection.

Education Benefit

If you elect supplemental AD&D insurance for your child and you or your covered spouse/domestic partner dies in a covered accident, the plan pays an education benefit for each covered child enrolled in an accredited school of higher learning (or in the 12th grade and enrolled in an accredited school of higher learning within one year of the accident). To help pay expenses, your benefit amount increases by 5% to up to \$5,000 for each qualifying child. This benefit is payable each year for four consecutive years as long as the child continues his/her education.

If you don't have a qualifying child, your beneficiary receives an additional \$1,000.

Felonious Assault Benefit

If you're injured or killed as the result of felonious assault while on county property or on county business, the plan pays up to an additional 25% of your basic AD&D benefit, up to \$100,000. This felonious assault benefit is available if your injury or death is the result of an actual or attempted robbery or holdup (or kidnapping associated with a holdup). Felonious assaults inflicted by county employees or members of your family or household aren't covered.

Rehabilitation Benefit

If you or a covered dependent experiences a covered loss or injury, the plan pays an additional benefit for covered rehabilitative expenses due to the loss or injury if they're incurred within two years of a covered accident. This benefit maximum is \$10,000 in rehabilitative expenses for all losses or injuries caused by the same accident. No rehabilitation benefit will be paid for any loss not covered by the plan. In addition, benefits won't be payable if a covered person is entitled to benefits under any workers' compensation act or similar law.

Seatbelt/Airbag Benefit

The plan pays an additional benefit of 10% of the full AD&D benefit amount, up to \$25,000, if a seatbelt fails to protect you or a covered dependent and death results. The accident causing death must occur while the covered person is operating, or riding as a passenger in, an automobile and wearing a properly fastened, original, factory-installed seatbelt. A child restraint—as defined by state law and approved by the National Highway Traffic Safety Administration—properly secured and being used as recommended by its manufacturer for children of like age and weight at the time of the accident also qualifies as a seatbelt.

The plan pays an additional 5% of the full AD&D benefit amount, up to \$12,500, if a seatbelt benefit is payable and the covered person is positioned in a seat protected by a properly functioning, original, factory-installed supplemental restraint system that inflates on impact (often called an "airbag").

Verification of actual seatbelt use at the time of the accident and airbag inflation at impact must be part of an official accident report or be certified, in writing, by the investigating officer. If that certification isn't available or if it's unclear whether the covered person was wearing a properly fastened seatbelt or positioned in a seat protected by a properly functioning and properly deployed supplemental restraint system, the designated beneficiary receives a fixed benefit of \$1,000.

Secure Travel Benefit

If you or a covered family member travels 100 or more miles from home, predeparture services and travel and health emergency assistance are available through Worldwide Assistance Services Inc. (See *Contact Information*.)

Predeparture Services

Predeparture services include information on:

- immunization requirements;
- visa and passport regulations;
- foreign exchange rates;
- embassy/consular referrals;

- travel/tourist advisories; and
- climate and cultural issues.

Travel Assistance

When you're traveling, Worldwide Assistance will:

- help you locate and replace luggage, documents and any other lost or stolen possessions;
- arrange aid from local attorneys, embassies and consulates if you need legal assistance, and provide up to \$5,000 in bail bond, where permitted by law (you must guarantee reimbursement);
- provide phone translation or local interpreters for all major languages;
- give you a cash advance up to \$250 (you must guarantee reimbursement);
- change or make new airline, hotel or car rental reservations in the event of an emergency; and
- relay urgent messages to and from friends, relatives and business associates through the Emergency Message Center.

Health Emergency Assistance

If an unforeseen health emergency arises while you're traveling, Worldwide Assistance will:

- provide referrals to local physicians, dentists and medical treatment facilities;
- help you refill a prescription that has been lost, stolen or depleted;
- arrange for payment of up to \$5,000 of your reimbursable medical expenses (as determined by your medical plan);
- pay for your transportation to the nearest medical facility where a medical condition can be properly treated if medically necessary (determined by a Worldwide Assistance–designated physician);
- arrange and pay for the safe return of any dependent children under age 16 if you're hospitalized, and for a traveling companion's return in the event of delays due to your medical emergency;
- arrange and pay for a visit by a family member or friend if you're traveling alone and hospitalized for at least 10 days; and
- arrange all necessary government authorizations and pay for the return of your remains to your place of residence for burial or cremation in the event you die.

Special Care Benefit for Children

If you elected supplemental AD&D insurance for your child and he/she has a covered accidental injury, you receive double the AD&D benefit amount, up to \$50,000. If your child has two covered losses, only the larger amount payable will be doubled. If, in addition to a covered loss, your child dies because of the accident, only the death benefit is payable.

This benefit can help you cope with the ongoing financial obligations for a child who requires ongoing medical attention, rehabilitation services and a specialized education.

Violent Crime Benefit

This benefit pays up to an additional 25% of your supplemental AD&D benefit amount, up to \$100,000, if you or a covered dependent suffers a covered loss due to a violent crime. The plan also pays an additional benefit for hospital confinement as the result of a violent crime—\$100 a day up to 10 days (hospital confinement must begin within one year of the crime).

This violent crime benefit applies to:

- actual or attempted robbery or holdup;
- actual or attempted kidnapping; and
- any other type of assault classified as a felony based on governing statute or common law in the state where it occurred.

A copy of a police report containing proof that the loss was a direct result of a covered crime must be provided before any AD&D benefit is paid.

Receiving Benefit Payments

It's important that you know how claims are filed and how benefits are paid.

How to File a Claim

For a death, specified dismemberment or paralysis claim, you or your beneficiary should contact Benefits and Retirement Operations. Benefits and Retirement Operations staff will help file the claim with CIGNA and provide referrals to counseling and other resources as requested. The claim should be filed within 90 days of the loss or death.

CIGNA requires proof of loss—for example, a certified copy of the death certificate or accident report—within 90 days of the loss, or as soon as reasonably possible, before benefits are payable. For a death claim, CIGNA may, at its own expense and unless prohibited by law, have an autopsy performed to determine a death benefit. While a dismemberment or paralysis claim is pending, CIGNA may have the covered person examined by a health or vocational professional of his/her own choice at his/her expense, as often as reasonably necessary.

CIGNA processes the claim within 90 days of receipt. If CIGNA needs more time, you or your beneficiary is notified in writing, before the initial 90 days end, of the need for an extension of up to 90 days.

If the claim is denied, you or your beneficiary is notified in writing of reasons for the denial, the right to appeal and the right to obtain copies of all documents related to the claim which the plan reviewed in making the determination.

How Benefits Are Paid

AD&D insurance benefits are payable if you or a covered dependent dies as the result of a covered accident.

Benefits are paid in a lump sum and aren't subject to federal income tax. Be sure to consult your tax advisor for more information on taxes and death benefits.

Understanding Exclusions and Limitations

No AD&D benefits are paid for loss resulting from:

- an accident that occurs while the covered person is engaged in the activities of active duty service in the military, navy or air force of any country or international organization. Accidents that occur while the covered person is engaged in Reserve or National Guard training aren't excluded;
- commission of or attempt to commit a felony;
- declared or undeclared war or act of war;
- intentionally self-inflicted injuries, or any attempted self-inflicted injuries, while sane or insane;
- the covered person performing any of the following:
 - piloting, serving as a crew member or taking flying lessons (exclusion doesn't apply if riding as a passenger);
 - hang gliding; and
 - parachuting, except a parachute jump for self-preservation;

- sickness, disease, bodily or mental infirmity, medical or surgical treatment or bacterial or viral infection, regardless of how contracted (except bacterial infection that is the natural and foreseeable result of an accidental external cut or wound, or accidental food poisoning); or
- travel or flight in (including getting in or out, on or off) any aircraft or device that can fly above the earth's surface, if:
 - the aircraft or device is being used for any of these purposes:
 - for test or experiment;
 - by or for any military authority (aircraft flown by the U.S. Military Airlift Command or similar service of another country aren't excluded); and
 - for travel beyond the earth's atmosphere.

GLOSSARY

Aetna

"Aetna Life Insurance" is the organization King County contracts with to provide life insurance benefits.

Automobile

An "automobile" is a private-passenger motor vehicle with four or more wheels that is both designed and required to be licensed for use on the highways of any state or country. An "automobile" includes, but isn't limited to, a sedan, station wagon or jeep-type vehicle, or a motor vehicle of the pickup, van, camper or motor-home type. An "automobile" doesn't include a mobile home or any motor vehicle used in mass or public transit.

Base annual salary

"Base annual salary" is your base pay excluding overtime, bonuses, shift differential, premium pay or any other special pay.

Beneficiary

A "beneficiary" is the person or organization you designate to receive any life or AD&D insurance benefits payable at the time of your death.

CIGNA

"CIGNA Group Insurance" is the organization King County contracts with to provide AD&D insurance benefits. CIGNA Group Insurance products and services are provided by underwriting subsidiaries of CIGNA Corporation, including Life Insurance Company of North America. "CIGNA" is used to refer to these subsidiaries and is a registered service mark.

Covered accident—AD&D insurance

A "covered accident" is an event that causes bodily injuries while a person is covered under the AD&D insurance plan. The bodily injury must directly result in a covered loss.

Covered rehabilitative expense

A “covered rehabilitative expense” is an expense that:

- is charged for medically necessary rehabilitative training service of the covered person performed under the care, supervision or order of a physician;
- doesn’t exceed the usual level of charges for similar treatment, supplies or services in the locality where the expense is incurred (for a hospital room and board charge, doesn’t exceed the most common charge for semiprivate room and board in the hospital where the expense is incurred); and
- doesn’t include charges that wouldn’t have been made if there were no insurance.

Disabled—Life insurance

You’re considered permanently and totally “disabled” only if disease or injury prevents you from working at your own job or any other job for pay or profit, and continues to prevent you from working at any reasonable job. A “reasonable job” is any job for pay or profit that you are (or may reasonably become) fitted for by education, training or experience.

Evidence of insurability (EOI)

“Evidence of insurability (EOI)” is any statement of a person’s physical condition, occupation or other factor that provides proof that he/she is insurable.

Hospital

A “hospital” is a facility that:

- is operated according to law for the care and treatment of injured people;
- has organized facilities for diagnosis and surgery on its premises or in facilities available to it on a prearranged basis;
- has 24-hour nursing service by registered nurses; and
- is supervised by one or more physicians.

A “hospital” doesn’t include:

- a nursing, convalescent or geriatric unit when a patient is confined there mainly to receive nursing care;
- a facility that is, other than incidentally, a rest home, nursing home, convalescent home or home for the aged, nor does it include any ward, room, wing or other section of the hospital that is used for such purposes; or
- any military or veterans’ hospital or soldiers’ home or any hospital contracted for or operated by any national government or government agency for the treatment of members or former members of the armed forces.

Licensed child care center

A “licensed child care center” is a facility run according to law, including laws and regulations applicable to child care facilities, and that provides care and supervision for children in a group setting on a regular, daily basis. A child care center doesn’t include a hospital, the child’s home, or care provided during normal school hours while a child is attending grades 1–12.

Limitation

A “limitation” is any restricting condition, such as age, time covered and waiting periods.

Medically necessary rehabilitative training service

A “medically necessary rehabilitative training service” is any medical service, medical supply, medical treatment or hospital confinement (or part of a hospital confinement) that is essential for physical rehabilitative training due to the injury for which it is prescribed or performed; meets generally accepted standards of medical practice and is ordered by a doctor.

Supplemental restraint system

A “supplemental restraint system” is an airbag that inflates for added protection to the head and chest area.

